



VPI/SW/002 CIP2 FWC DIV2 CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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TECH CENTER 1600/2900

Examiner : Cybille Delacroix Muirheid  
 Group : 1614  
 Applicants : Paul R. Sleath et al.  
 Application No. : 09/670,106 Confirmation No.: 5809  
 Filed : September 26, 2000  
 For : INTERLEUKIN 1 $\beta$  PROTEASE AND INTERLEUKIN 1 $\beta$   
 PROTEASE INHIBITORS

New York, New York  
 October 23, 2003

Hon. Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

**RESPONSE TO OFFICE ACTION**

Sir:

This responds to the April 23, 2003 Office Action in the above-identified application.

Applicants have filed concurrently herewith a Petition for a three-month extension of time for replying to the Office Action and have paid the required fee under 37 C.F.R. §§ 1.136(a) and 1.17(a)(3). With the extension, the time for filing this response is extended up to and including October 23, 2003.

Kindly amend the application as follows:

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 6 of this paper.


FEE FOR ADDITIONAL CLAIMS

- ☒ A fee for additional claims is not required.  
☐ A fee for additional claims is required.

EXTENSION FEE

- ☒ The following extension is applicable to the Response filed herewith; ☐ \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☒ \$950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1480.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136 (a); ☐ \$2010.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).
- ☒ A check in the amount of ☐ \$110.00; ☐ \$420.00; ☒ \$950.00; ☐ \$1480.00; ☐ \$2010.00; in payment of the extension fee is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge the ☐ \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1480.00; ☐ \$2010.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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Attorney for Applicants

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